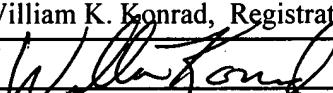


TRANSMITTAL FORM		Application Number	60/410,843
<i>(To be used for all correspondence after initial filing)</i> <i>SEP 15 2005</i> <i>PATENT & TRADEMARK OFFICE</i>		Filing Date	September 13, 2002
		Inventor	S. Somekh et al.
		Group Art Unit	1753
		Examiner Name	Steven H. Versteege
		Total Number of Pages in this Submission: 28	Attorney Docket Number

ENCLOSURES (check all that apply)

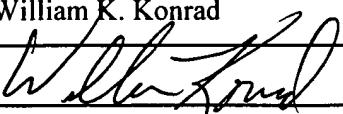
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits /Declarations <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; ___ references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input checked="" type="checkbox"/> Formal Drawings: <u>9</u> sheets <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition: <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, and/or Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ___ <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Certificate of Correction of Applicant's Mistake (37 CFR 1.323) <input type="checkbox"/> Certificate of Correction of Office Mistake (37 CFR 1.322) <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name:	William K. Konrad, Registration No. 28,868
Signature:	
Date:	September 12, 2005
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983	<input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiency of fees, or credit any overpayment, to Deposit Account No. 50-0585

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PATENT
006869USA
7828.7085

In re Application of)
Somekh, et al.) Examiner: Steven H. Versteeg
Serial No.: 10/659,902)
Filed: September 11, 2003) Art Unit: 1753

For: END POINT DETECTION FOR SPUTTERING AND RESPUTTERING

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Sir:

Transmitted herewith is an Amendment in the above-identified application.
The fee (large entity basis) has been calculated as shown below:

Total claims	26	less claims previously paid for	26	=	x fee (\$50) = \$0
Independent claims	10	less claims previously paid for	10	=	x fee (\$200) = \$0
Total claims fee:					

A check in the amount of \$ 120 to cover the extension fee is enclosed.
 A check in the amount of \$____ to cover the filing fee is enclosed.
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The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0585. A duplicate of this sheet is enclosed.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
 Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

William K. Konrad
Registration No. 28,868

Dated: September 12, 2005

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